

MAR 05 2007

Atty Docket No. 016301-045510US

PTO FAX NO.: 1-571-273-8300

ATTENTION: Examiner ZERVIGON, RUDY

Group Art Unit 1763

OFFICIAL COMMUNICATION

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I hereby certify that the following documents in re Application of Karthik Janakiraman et al., Application No. 10/674,569, filed September 29, 2003 for GAS DISTRIBUTION SHOWERHEAD are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1 page);
2. Notice of Appeal, in duplicate (2 pages); and
3. Petition for Extension of Time, in duplicate (2 pages)

Number of pages being transmitted, including this page: 6

Dated: March 5, 2007

Peggy Smiley
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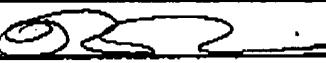
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Application Number	10/674,569
Filing Date	September 29, 2003
First Named Inventor	Janakiraman, Karthik
Art Unit	1763
Examiner Name	ZERVIGON, RUDY
Attorney Docket Number	016301-045510US

ENCLOSURES (Check all that apply)

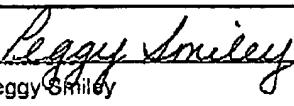
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
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<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
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Date	March 5, 2007	Reg. No.	39,496

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